DEPARTMENT OF PLANNING AND ZONING CITY OF BRUNSWICK, MARYLAND

City Hall, 1 West Potomac Street

Brunswick, Maryland 21716

	APPLICATION FORM AND CHECK LIST					Mailed:	
Subdivision Name						For Office Use Only	
Location						Grid	
Owner						Acres	
		ineer					
Addre	SS						
					Date	Fee	
		SIGNATURE OF OWNER OR AGENT			_		
		FINAL					
OK	NO	GENERAL	OK	NO	EXISTING & PROPOSED Cont'd. Health Department Comments		
		Drawing: Size, Material, Ink, Legible					
		Title Information: Name, Sect., Location			State Highway		
		Scale, Date, North Point Election District, Community, State				in Heavy Outline , R/W. reserve, total	
		Name, Address, Phone of Owner,				ocation, Coordinates	
		Engineer			Coordinates of		
		Location Map, Scale				division Name, L/F	
		Tax Map Numbers & Overall Property				ds – Names, R/W, Width	
		Notary & Seal			Bearing, dimension of all lines		
		Horizontal Datum			Curve Data Required		
		Signature Block – BPc (Chair)			Building Setback		
		Signature Block – Health Dept.				& Lot Numbers	
		Surveyors Certification & Seal			Table of Usea		
		Owners Certification & Dedication				conveyed/reserved	
		Officer (Approving Authority)			Appropriate No		
		- ···· (· · · · · · · · · · · · · · ·			Easements: W		
OK	NO	EXISTING & PROPOSED			Floodplain and		
	-	Improvement Plans				ngs/Landscape	
		Public Works/City Eng. Comments			Demolition Pe		
		Accordance w/ Preliminary Plat			Water & Sewe		
$\overline{\text{CO}}$ N	IMEN:						